

Fill in this information to identify your case and this filing:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Eastern District of Michigan</b>			
Case number	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

Street address, if available, or other description  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

County \_\_\_\_\_

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property  
(see instructions)

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

→ \$0.00

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.**

## 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

3.1 Make: Cadillac

Who has an interest in the property? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Model: \_\_\_\_\_

Year: 2017Approximate mileage: 50,0000Other information: 

Check if this is community property (see instructions)

Current value of the entire property?

\$22,000.00

Current value of the portion you own?

\$22,000.00

## 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here. → \$22,000.00

## Part 3: Describe Your Personal and Household Items

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

## 6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No  
 Yes. Describe.....

Furniture

\$3,000.00

## 7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No  
 Yes. Describe.....

Cell Phone and Tv's

\$2,000.00

## 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No  
 Yes. Describe.....

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

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**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

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**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Clothing	\$500.00
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**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

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**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

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**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Describe.....

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**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached**

for Part 3. Write that number here..... →

\$5,500.00

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

Cash.....

\_\_\_\_\_

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No  
 Yes.....

Institution name:

17.1. Checking account: Chase Bank \$900.00

17.2. Checking account: \_\_\_\_\_

17.3. Savings account: \_\_\_\_\_

17.4. Savings account: \_\_\_\_\_

17.5. Certificates of deposit: \_\_\_\_\_

17.6. Other financial account: \_\_\_\_\_

17.7. Other financial account: \_\_\_\_\_

17.8. Other financial account: \_\_\_\_\_

17.9. Other financial account: \_\_\_\_\_

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No  
 Yes.....

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No  
 Yes. Give specific information about them.....

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No  
 Yes. Give specific information about them.....

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No  
 Yes. List each account separately.

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No  
 Yes.....

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

No  
 Yes.....

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No  
 Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No  
 Yes. Give specific information about them....

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**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No  
 Yes. Give specific information about them....

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**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No  
 Yes. Give specific information about them....

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**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No  
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

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Federal: \_\_\_\_\_  
 State: \_\_\_\_\_  
 Local: \_\_\_\_\_

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No Yes. Give specific information.....

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information.....
**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company  
of each policy and list its value....

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.....
**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....
**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....
**35. Any financial assets you did not already list** No Yes. Give specific information.....
**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

→

\$900.00

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned** No Yes. Describe.....

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**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe.....

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**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade** No Yes. Describe.....

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**41. Inventory** No Yes. Describe.....

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**42. Interests in partnerships or joint ventures** No Yes. Describe.....

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**43. Customer lists, mailing lists, or other compilations** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

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**44. Any business-related property you did not already list** No Yes. Give specific information.....

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**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....** →

<b>\$0.00</b>
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**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

## 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

 No. Go to Part 7. Yes. Go to line 47.

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

## 47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes.....

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## 48. Crops—either growing or harvested

 No Yes. Give specific information.....

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## 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes.....

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## 50. Farm and fishing supplies, chemicals, and feed

 No Yes.....

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## 51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.....

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## 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →

\$0.00

## Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

## 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

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## 54. Add the dollar value of all of your entries from Part 7. Write that number here..... →

\$0.00

## Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....	→	\$0.00
56. Part 2: Total vehicles, line 5		\$22,000.00
57. Part 3: Total personal and household items, line 15		\$5,500.00
58. Part 4: Total financial assets, line 36		\$900.00
59. Part 5: Total business-related property, line 45		\$0.00
60. Part 6: Total farm- and fishing-related property, line 52		\$0.00
61. Part 7: Total other property not listed, line 54	+	\$0.00
62. Total personal property. Add lines 56 through 61.....	\$28,400.00	Copy personal property total → + \$28,400.00
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		\$28,400.00

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

1.  You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Furniture	\$3,000.00	<input checked="" type="checkbox"/> \$3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6			
Brief description: Cell Phone and TV's	\$2,000.00	<input checked="" type="checkbox"/> \$2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 7			
3. Are you claiming a homestead exemption of more than \$170,350?	(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes			

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Clothing	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3) _____ _____
Line from Schedule A/B: 11			
Brief description: Chase Bank Checking account	\$900.00	<input checked="" type="checkbox"/> \$900.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) _____ _____
Line from Schedule A/B: 17			

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Eastern District of Michigan</b>			
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

2.1	GM Financial Creditor's Name  PO Box 181145 Number Street  Arlington , TX 76096 City State ZIP Code	Describe the property that secures the claim: 2017 Cadillac	\$28,000.00	\$22,000.00	\$6,000.00
As of the date you file, the claim is: Check all that apply.					
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
Nature of lien. Check all that apply.					
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)					

Last 4 digits of account number — — — —

Add the dollar value of your entries in Column A on this page. Write that number here:

\$28,000.00

## Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

## Column A

## Amount of claim

Do not deduct the value of collateral.

## Column B

## Value of collateral that supports this claim

Column C  
Unsecured portion  
If any

2.2

Creditor's Name

Number Street

City State ZIP Code

## Who owes the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Date debt was incurred

## Describe the property that secures the claim:

## As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \$0.00If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$28,000.00

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Eastern District of Michigan</b>			
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>Ricks &amp; Associates PLLC</b> Priority Creditor's Name <b>5600 West Maple Rd A-180</b> Number Street <b>West Bloomfield, MI 48322</b> City State ZIP Code	Last 4 digits of account number _____	<b>\$300.00</b>	<b>\$300.00</b> <b>\$0.00</b>
		When was the debt incurred? _____		
		As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		Type of PRIORITY unsecured claim:		
		<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input checked="" type="checkbox"/> Other. Specify <b>Attorney Fees</b>		
		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1 American Coradius International LLC

Nonpriority Creditor's Name

2420 Sweet Home Rd 150

Number Street

Amherst, NY

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

Total claim

unknown

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2 Arbor-Ypsi Foot & Ankle Center

Nonpriority Creditor's Name

3768 Packard A

Number Street

Ann Arbor, MI

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 4860

\$69.67

When was the debt incurred? 07/28/2016

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.3 AT&T

Nonpriority Creditor's Name

Po Box 5014

Number Street

Carol Stream, IL 60197-5014

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

\$1,536.99

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4	<b>Capital One</b> Nonpriority Creditor's Name <b>Po Box 6492</b> Number Street <b>Carol Stream, IL 60197-6492</b> City State ZIP Code	Last 4 digits of account number <u>1951</u> <b>When was the debt incurred? 08/26/2016</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$2,432.81</b>
4.5	<b>Comcast</b> Nonpriority Creditor's Name <b>Po Box 7500</b> Number Street <b>Southeastern, PA 19398-7500</b> City State ZIP Code	Last 4 digits of account number <u>7206</u> <b>When was the debt incurred?</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	<b>\$363.50</b>
4.6	<b>Comcast</b> Nonpriority Creditor's Name <b>Po Box 7500</b> Number Street <b>Southeastern, PA 19398-7500</b> City State ZIP Code	Last 4 digits of account number <u>7206</u> <b>When was the debt incurred? 12/13/2016</b> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	<b>\$363.50</b>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

### Total claim

4.7	<p><b>Convergent Outsourcing</b> Nonpriority Creditor's Name <b>800 SW 39th St</b> Number Street <b>Renton, WA 98507</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> <u>2676</u></p> <p><b>When was the debt incurred?</b> <u>02/19/2019</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Debt Collection</b></p>	<u>\$1,399.20</u>
4.8	<p><b>Credit Control LLC</b> Nonpriority Creditor's Name <b>PO Box 31179</b> Number Street <b>Tampa, FL</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> <u>_____</u></p> <p><b>When was the debt incurred?</b> <u>_____</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Debt Collection</b></p>	<u>unknown</u>
4.9	<p><b>Eric W Brust</b> Nonpriority Creditor's Name <b>2355 W Stadium BLVD</b> Number Street <b>Ann Arbor, MI 48103</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> <u>0543</u></p> <p><b>When was the debt incurred?</b> <u>_____</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical</b></p>	<u>\$2,555.00</u>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10	<b>First Premier Bank</b> Nonpriority Creditor's Name <u>3820 N Louise Ave</u> Number Street <u>Sioux Falls, SD 57107-0145</u> City State ZIP Code	Last 4 digits of account number <u>2059</u> When was the debt incurred? <u>09/09/2016</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$723.06</b>
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.11	<b>FMS Inc.</b> Nonpriority Creditor's Name <u>PO Box 707600</u> Number Street <u>Tulsa, OK 74170</u> City State ZIP Code	Last 4 digits of account number <u>unknown</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collecting for Walmart</b>	
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.12	<b>Forest Health Medical Center</b> Nonpriority Creditor's Name <u>Po Box 72456</u> Number Street <u>Cleveland, OH 44192-0002</u> City State ZIP Code	Last 4 digits of account number <u>7047</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	<b>\$496.84</b>
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

### Total claim

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.16	<p><b>Nordstrom</b>            Nonpriority Creditor's Name  <b>PO Box 79139</b>            Number Street  <b>Phoenix, AZ 85062</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0681</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>	<u>\$547.25</u>
4.17	<p><b>NPRTO Michigan LLC</b>            Nonpriority Creditor's Name  <b>256 W Data Dr</b>            Number Street  <b>Draper, UT 84020-2315</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7409</u></p> <p>When was the debt incurred? <u>02/28/2019</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Lease (Furniture)</b></p>	<u>\$4,922.44</u>
4.18	<p><b>PayPal Credit</b>            Nonpriority Creditor's Name  <b>PO Box 5138</b>            Number Street  <b>Timonium, MD 21094</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3095</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify</p>	<u>\$2,362.49</u>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.19	<b>Professional Account Management</b> Nonpriority Creditor's Name <u>PO Box 2549</u> Number Street <u>Detroit, MI 48231</u> City State ZIP Code	Last 4 digits of account number <u>0081</u> When was the debt incurred? <u>11/27/2018</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Debt Collection</b>	<u>\$250.00</u>
4.20	<b>Sprint</b> Nonpriority Creditor's Name <u>PO Box 4191</u> Number Street <u>Carol Stream, IL 60197</u> City State ZIP Code	Last 4 digits of account number <u>2676</u> When was the debt incurred? <u>11/27/2018</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Utility</b>	<u>\$1,399.20</u>
4.21	<b>St Joseph Mercy Hospital</b> Nonpriority Creditor's Name <u>PO Box 776480</u> Number Street <u>Chicago, IL</u> City State ZIP Code	Last 4 digits of account number <u>9043</u> When was the debt incurred? <u>03/17/2019</u> <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	<u>\$85.04</u>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.			Total claim
4.22	<p><b>University of Michigan Hospital</b> Nonpriority Creditor's Name <b>Patient Customer Services</b></p> <p><b>Dept: Ch14410</b> Number Street <b>Palatine, IL 60055-0001</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3983</u></p> <p>When was the debt incurred? <u>286.27</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical</b></p>	<u>unknown</u>
4.23	<p><b>University of Michigan Hospital</b> Nonpriority Creditor's Name <b>Patient Customer Services</b></p> <p><b>Dept: Ch14410</b> Number Street <b>Palatine, IL 60055-0001</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3781</u></p> <p>When was the debt incurred? <u></u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical</b></p>	<u>\$304.25</u>
4.24	<p><b>University of Michigan Hospital</b> Nonpriority Creditor's Name <b>Patient Customer Services</b></p> <p><b>Dept: Ch14410</b> Number Street <b>Palatine, IL 60055-0001</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6924</u></p> <p>When was the debt incurred? <u></u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical</b></p>	<u>\$233.64</u>

## Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.25	<p><b>Verizon Wireless</b>            Nonpriority Creditor's Name  <b>PO Box 26055</b>            Number Street  <b>Minneapolis, MN 55426</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2775</u></p> <p>When was the debt incurred? <u>09/07/2016</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Phone</b></p>	<b>\$402.72</b>
4.26	<p><b>Von Maur</b>            Nonpriority Creditor's Name  <b>6565 Brady St</b>            Number Street  <b>Davenport, IA</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2775</u></p> <p>When was the debt incurred? <u>09/07/2016</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify</p>	<b>\$300.22</b>
4.27	<p><b>Walmart/Synchrony Bank</b>            Nonpriority Creditor's Name  <b>PO Box 530927</b>            Number Street  <b>Atlanta, GA 30353</b>            City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one.  <input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2477</u></p> <p>When was the debt incurred? <u>06/24/2018</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Credit Card</b></p>	<b>\$632.65</b>

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

<b>Total claims from Part 1</b>	<b>Total claim</b>	
	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$300.00</u>
	6e. Total. Add lines 6a through 6d.	<u>\$300.00</u>
<b>Total claims from Part 2</b>	<b>Total claim</b>	
	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$22,040.86</u>
	6j. Total. Add lines 6f through 6i.	<u>\$22,040.86</u>

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Eastern District of Michigan</b>			
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease		State what the contract or lease is for	
2.1	Name			
	Number	Street		
	City	State	ZIP Code	
2.2	Name			
	Number	Street		
	City	State	ZIP Code	
2.3	Name			
	Number	Street		
	City	State	ZIP Code	
2.4	Name			
	Number	Street		
	City	State	ZIP Code	
2.5	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b>	<b>Frederick</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No  
 Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

\_\_\_\_\_  
Name

Number      Street

City      State      ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1

Name

Number      Street

City      State      ZIP Code

Schedule D, line \_\_\_\_\_

Schedule E/F, line \_\_\_\_\_

Schedule G, line \_\_\_\_\_

Official Form 106H

Schedule H: Your Codebtors

page 1 of 1

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		<b>Eastern District of Michigan</b>	
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 income as of the following date:

---

MM / DD / YYYY

**Official Form 106I**

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Employment

## 1. Fill in your employment information.

<p>1. Fill in your employment information.</p> <p>If you have more than one job, attach a separate page with information about additional employers.</p> <p>Include part time, seasonal, or self-employed work.</p> <p>Occupation may include student or homemaker, if it applies.</p>		<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
<p><b>Employment status</b></p>		<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not Employed
<p><b>Occupation</b></p>		<u>Customer Service</u>	
<p><b>Employer's name</b></p>		<u>Faurecia USA Holdings Inc</u>	
<p><b>Employer's address</b></p>		<u>2800 High Meadow Circle</u> Number Street <u> </u> <u> </u>	Number Street <u> </u> <u> </u>
<p><b>How long employed there?</b></p>		<u>Auburn Hills, MI 48326</u> City <u> </u> State <u> </u> Zip Code <u> </u>	City <u> </u> State <u> </u> Zip Code <u> </u>
<p><b>4 years</b></p>		<u> </u>	

## Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. _____ \$2,125.28	_____ \$0.00
3. Estimate and list monthly overtime pay.	3. + _____ \$0.00	+ _____ \$0.00
4. Calculate gross income. Add line 2 + line 3.	4. _____ \$2,125.28	_____ \$0.00

		For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here.....</b>	→	4. <u>\$2,125.28</u>	<u>\$0.00</u>
<b>5. List all payroll deductions:</b>			
5a. <b>Tax, Medicare, and Social Security deductions</b>		5a. <u>\$182.39</u>	<u>\$0.00</u>
5b. <b>Mandatory contributions for retirement plans</b>		5b. <u>\$61.49</u>	<u>\$0.00</u>
5c. <b>Voluntary contributions for retirement plans</b>		5c. <u>\$127.53</u>	<u>\$0.00</u>
5d. <b>Required repayments of retirement fund loans</b>		5d. <u>\$0.00</u>	<u>\$0.00</u>
5e. <b>Insurance</b>		5e. <u>\$65.00</u>	<u>\$0.00</u>
5f. <b>Domestic support obligations</b>		5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. <b>Union dues</b>		5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. <b>Other deductions. Specify:</b> _____		5h. + <u>\$0.00</u>	+ <u>\$0.00</u>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.			
6. <b>Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.		6. <u>\$436.41</u>	<u>\$0.00</u>
<b>7. List all other income regularly received:</b>			
8a. <b>Net income from rental property and from operating a business, profession, or farm</b>		8a. <u>\$0.00</u>	<u>\$0.00</u>
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.			
8b. <b>Interest and dividends</b>		8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b>		8c. <u>\$0.00</u>	<u>\$0.00</u>
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			
8d. <b>Unemployment compensation</b>		8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. <b>Social Security</b>		8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. <b>Other government assistance that you regularly receive</b>		8f. <u>\$0.00</u>	<u>\$0.00</u>
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			
Specify: _____			
8g. <b>Pension or retirement income</b>		8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. <b>Other monthly income. Specify:</b> _____		8h. + <u>\$0.00</u>	+ <u>\$0.00</u>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.			
9. <b>Calculate monthly income.</b> Add line 7 + line 9.		9. <u>\$0.00</u>	<u>\$0.00</u>
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse			
10. <b>State all other regular contributions to the expenses that you list in Schedule J.</b>		10. <u>\$1,688.87</u>	+ <u>\$0.00</u> = <u>\$1,688.87</u>
<b>11. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies			
11. <b>Specify:</b> _____		11. + <u>\$0.00</u>	<u>\$0.00</u>
12. <b>Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. <u>\$1,688.87</u>	<u>\$1,688.87</u>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain:			

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b>	<b>Frederick</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.

Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

No

Do not list Debtor 1 and  
Debtor 2.

Yes. Fill out this information for  
each dependent.....

Do not state the dependents' names.

Dependent's relationship to  
Debtor 1 or Debtor 2

Child

Dependent's  
age

8

No.  Yes.

Child

14

No.  Yes.

Child

16

No.  Yes.

\_\_\_\_\_

\_\_\_\_\_

No.  Yes.

\_\_\_\_\_

\_\_\_\_\_

No.  Yes.

3. Do your expenses include expenses  
of people other than yourself and  
your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of  
such assistance and have included it on Schedule I: Your Income (Official Form 106I).

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the  
ground or lot.

4.

If not included in line 4:

4a. Real estate taxes

4a.

\$0.00

4b. Property, homeowner's, or renter's insurance

4b.

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4c.

\$0.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

## Your expenses

5. Additional mortgage payments for your residence, such as home equity loans	5.	
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$0.00
6b. Water, sewer, garbage collection	6b.	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$0.00
6d. Other. Specify: _____	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$0.00
8. Childcare and children's education costs	8.	\$0.00
9. Clothing, laundry, and dry cleaning	9.	\$0.00
10. Personal care products and services	10.	\$0.00
11. Medical and dental expenses	11.	\$0.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$0.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$0.00
15b. Health insurance	15b.	\$0.00
15c. Vehicle insurance	15c.	\$0.00
15d. Other insurance. Specify: _____	15d.	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	
17b. Car payments for Vehicle 2	17b.	
17c. Other. Specify: _____	17c.	
17d. Other. Specify: _____	17d.	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19. Other payments you make to support others who do not live with you. Specify: _____	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

21. Other. Specify: \_\_\_\_\_

21. + \_\_\_\_\_ \$0.00

## 22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \_\_\_\_\_ \$0.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \_\_\_\_\_ \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \_\_\_\_\_ \$0.00

## 23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \_\_\_\_\_ \$1,688.87

23b. Copy your monthly expenses from line 22c above.

23b. - \_\_\_\_\_ \$0.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \_\_\_\_\_ \$1,688.87

## 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No.

None

 Yes.

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

#### Part 1: Summarize Your Assets

##### Your assets

Value of what you own

##### 1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$28,400.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$28,400.00

#### Part 2: Summarize Your Liabilities

##### Your liabilities

Amount you owe

##### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$28,000.00
---	-------------

##### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$300.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	+ \$22,040.86

##### Your total liabilities

\$50,340.86

#### Part 3: Summarize Your Income and Expenses

##### 4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$1,688.87
---	------------

##### 5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$0.00
---	--------

## Part 4: Answer These Questions for Administrative and Statistical Records

## 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

## 7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$2,224.74

## 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) \$0.009b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.009c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.009d. Student loans. (Copy line 6f.) \$0.009e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.009f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$0.009g. **Total**. Add lines 9a through 9f. \$0.00

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** \_\_\_\_\_  
/s/ Danielle Frederick  
Danielle Frederick, Debtor 1

Date 05/01/2019  
MM/ DD/ YYYY

**X** \_\_\_\_\_

Date \_\_\_\_\_  
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b> First Name	<b>Frederick</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

Married  
 Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Street	From _____ To _____	Number Street	From _____ To _____
City	State ZIP Code	City	State ZIP Code
Number Street	From _____ To _____	Number Street	From _____ To _____
City	State ZIP Code	City	State ZIP Code

Debtor 1

Danielle

First Name

Frederick

Middle Name

Last Name

Case number (if known) 19-45800-pjs

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	<b>Debtor 1</b>		<b>Debtor 2</b>
	<b>Sources of income</b> Check all that apply.	<b>Gross Income</b> (before deductions and exclusions)	<b>Sources of income</b> Check all that apply.
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For last calendar year:</b> (January 1 to December 31, <u>2018</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	<b>Debtor 1</b>		<b>Debtor 2</b>
	<b>Sources of income</b> Describe below.	<b>Gross income from each source</b> (before deductions and exclusions)	<b>Sources of income</b> Describe below.
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>

Debtor 1	<u>Danielle</u> First Name	<u>Frederick</u> Middle Name	<u>Case number (if known) 19-45800-pjs</u> Last Name
<b>For last calendar year:</b> (January 1 to December 31, <u>2018</u> <u>YYYY</u> )			
_____			
_____			
_____			
_____			
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> <u>YYYY</u> )			
_____			
_____			
_____			
_____			

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City	State	ZIP Code	

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Debtor 1

Danielle

First Name

Middle Name

Frederick

Last Name

Case number (if known) 19-45800-pjs

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City				
State ZIP Code				

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City				
State ZIP Code				

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title			<input type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
Case number		Number Street	<input type="checkbox"/> Concluded
		City	State ZIP Code

Debtor 1

Danielle

First Name

Frederick

Middle Name

Last Name

Case number (if known) 19-45800-pjs

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
 Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Creditor's Name

Number Street

City

State ZIP Code

Describe the property	Date	Value of the property
Explain what happened		
<input type="checkbox"/> Property was repossessed.		
<input type="checkbox"/> Property was foreclosed.		
<input type="checkbox"/> Property was garnished.		
<input type="checkbox"/> Property was attached, seized, or levied.		

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

No

Yes. Fill in the details.

Creditor's Name

Number Street

City

State ZIP Code

Describe the action the creditor took	Date action was taken	Amount taken

Last 4 digits of account number: XXXX- \_\_\_\_\_

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

No

Yes

#### Part 5: List Certain Gifts and Contributions

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

No

Yes. Fill in the details for each gift.

Debtor 1

Danielle

First Name

Frederick

Middle Name

Last Name

Case number (if known) 19-45800-pjs

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City	State ZIP Code		
Person's relationship to you _____			

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?** No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City	State ZIP Code		

**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?** No Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		

Debtor 1

Danielle

First Name

Middle Name

Frederick

Last Name

Case number (if known) 19-45800-pjs

## Part 7: List Certain Payments or Transfers

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Ricks &amp; Associates PLLC

Person Who Was Paid

5600 West Maple Rd A-180

Number Street

West Bloomfield, MI 48322

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Ricks & Associates PLLC	Attorney's Fee	4/8/2019	\$200.00
Person Who Was Paid			
5600 West Maple Rd A-180			
Number Street			
West Bloomfield, MI 48322			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			
	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
In Charge Debt Solutions	Cash	04/05/2019	\$25.00
Person Who Was Paid			
5600 West Maple Rd A-180			
Number Street			
West Bloomfield, MI 48322			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
5600 West Maple Rd A-180			
Number Street			
West Bloomfield, MI 48322			
City State ZIP Code			

Debtor 1

Danielle

First Name

Frederick

Middle Name

Last Name

Case number (if known) 19-45800-pjs**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer		_____
Number Street		_____
City State ZIP Code		_____

Person's relationship to you \_\_\_\_\_

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)** No Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust	_____
	_____

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units****20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.

Debtor 1

**Danielle**  
First Name      **Frederick**  
Middle Name      Last Name

Case number (if known) 19-45800-pjs

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---------------------------------	-------------------------------	--	---

Name of Financial Institution

XXXX- \_\_\_\_\_

 Checking Savings Money market Brokerage Other \_\_\_\_\_

Number Street

City      State      ZIP Code

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

 No Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution _____	Name _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

 No Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility _____	Name _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**Debtor 1**

Danielle

## Frederick

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First Name

Middle Name

Last Name

Case number (if known) 19-45800-pjs

#### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?		Describe the property	Value
Owner's Name <hr/> Number   Street			<hr/>
Number   Street <hr/> City                      State      ZIP Code			
City                      State      ZIP Code			

#### Part 10: Give Details About Environmental Information

**For the purpose of Part 10, the following definitions apply:**

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

**Report all notices, releases, and proceedings that you know about, regardless of when they occurred.**

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number   Street	Number   Street	
City	State   ZIP Code	

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Debtor 1

**Danielle**  
First Name      **Frederick**  
Middle Name      Last Name

Case number (if known) 19-45800-pjs

	<b>Governmental unit</b>	<b>Environmental law, if you know it</b>	<b>Date of notice</b>
Name of site	Governmental unit		
Number      Street	Number      Street		
	City      State      ZIP Code		
City	State      ZIP Code		

## 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

 No Yes. Fill in the details.

	<b>Court or agency</b>	<b>Nature of the case</b>	<b>Status of the case</b>
Case title	Court Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Number      Street		
Case number	City      State      ZIP Code		

## Part 11: Give Details About Your Business or Connections to Any Business

## 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

<b>Describe the nature of the business</b>		<b>Employer Identification number Do not include Social Security number or ITIN.</b>
Name		EIN: _____
Number      Street		
<b>Name of accountant or bookkeeper</b>		<b>Dates business existed</b>
City	State      ZIP Code	From _____ To _____

Debtor 1

**Danielle**  
First Name      Middle Name      **Frederick**  
Last Name

Case number (if known) 19-45800-pjs

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

No

Yes. Fill in the details below.

Date issued

Name \_\_\_\_\_ MM / DD / YYYY \_\_\_\_\_

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Part 12: Sign Below

I have read the answers on this **Statement of Financial Affairs** and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** \_\_\_\_\_ /s/ Danielle Frederick  
Signature of Danielle Frederick, Debtor 1

**X** \_\_\_\_\_  
Signature of \_\_\_\_\_

Date 05/01/2019

Date \_\_\_\_\_

Did you attach additional pages to your **Statement of Financial Affairs for Individuals Filing for Bankruptcy** (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<b>Danielle</b>	<b>Frederick</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Eastern District of Michigan</b>		
Case number (if known)	<b>19-45800-pjs</b>		

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>GM Financial</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>2017 Cadillac</b>		

## Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. **Unexpired leases** are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X \_\_\_\_\_  
/s/ Danielle Frederick  
Signature of Debtor 1

Signature of Debtor 1

Date 05/01/2019  
MM/ DD/ YYYY

**X** \_\_\_\_\_  
Signature of Debtor 2

Signature of Debtor 2

Date \_\_\_\_\_  
MM/ DD/ YYYY

UNITED STATES BANKRUPTCY COURT FOR  
THE EASTERN DISTRICT OF MICHIGAN

In Re: **Frederick, Danielle**  
Debtor(s).

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Case No. 19-45800-pjs  
Chapter 7  
Hon.

**STATEMENT OF ATTORNEY FOR DEBTOR(S)**  
**PURSUANT TO F.R. BANKR.P. 2016(b)**

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

1. The undersigned is the attorney for the Debtor(s) in this case.
2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]

**FLAT FEE**

A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid  
..... \$500.00

B. Prior to filing this statement, received .....  
..... \$200.00

C. The unpaid balance due and payable is .....  
..... \$300.00

## RETAINER

A. Amount of retainer received \_\_\_\_\_

B. The undersigned shall bill against the retainer at an hourly rate of \_\_\_\_\_ [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

3. \$0.00 of the filing fee has been paid.

4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]

- A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

6. The source of payments to the undersigned was from:

A.  Debtor(s)' earnings, wages, compensation for services performed

B.  Other (describe, including the identity of payor)

7. The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows:

Dated: 05/01/2019

/s/ Urenia Ricks-Johnson

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Agreed: /s/ Danielle Frederick  
Danielle Frederick, Debtor